

Case Number:	CM14-0010263		
Date Assigned:	02/21/2014	Date of Injury:	07/09/2013
Decision Date:	01/05/2015	UR Denial Date:	01/13/2014
Priority:	Standard	Application Received:	01/27/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Physical Medicine and Rehabilitation, and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Injured worker is a 20 yr. old male who was working as a construction worker when he fainted, fell and sprained his right ankle on 7/9/2013. He has been treated with medication, physical therapy and immobilization in a Cam boot. Progress notes also state that he developed chronic headaches and dizziness in addition to ankle pain. The injured worker was referred to podiatry. MRI and CT of the right ankle were requested but no results were provided. Chiropractic and acupuncture to the head and right ankle were denied based on the CA MTUS Diagnoses 1.Right ankle contusion 2.Right ankle arthralgias 3.Headache.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Chiropractic treatment 2 x 6 for the head and right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 14 Ankle and Foot Complaints Page(s): 369.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

Decision rationale: According to the CA MTUS, manual therapy and manipulation are not recommended for the ankle. The CA MTUS and ODG do not address manual therapy and manipulation for the head. Therefore, the request is not medically necessary.

Acupuncture 2 x 6 to the head and right ankle: Upheld

Claims Administrator guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Acupuncture Treatment Guidelines.

Decision rationale: The IW has received an unspecified amount of PT to the right ankle. There is no indication PT was given to the head. Aside from the utilization review report, I could not find where acupuncture was being requested. Acupuncture Medical Treatment Guidelines recommend "Acupuncture is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery. " There is no indication in the notes that this is being done or why acupuncture was chosen as a treatment modality. The Acupuncture Medical Treatment Guidelines recommend a trial of 3-6 sessions of acupuncture before consideration may be given to more session. The request for 12 sessions of acupuncture exceeds the maximum number of sessions recommended for a trial. Therefore, the request is not medically necessary.

MRI of the brain: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG(The Official Disability Guidelines) The Head MRI.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Head, Imaging.

Decision rationale: The ODG states," Magnetic Resonance Imaging (MRI) scans are more sensitive than CT for detecting traumatic cerebral injury. Initially, MRI scans are clinically useful in the following situations to: - Determine neurological deficits not explained by CT - Evaluate prolonged interval of disturbed consciousness -Define evidence of acute changes superimposed on previous trauma or disease." The IW does not present with any of the criteria mentioned above. He has a normal neurological exam. The complaint is of daily headaches and it is not clear what types of treatment have been rendered for his head. Therefore, the request is not medically necessary.